

EXHIBIT B

O I P E

FEB 04 2002

TO THE UNITED STATES PATENT AND TRADEMARK OFFICES:
PLEASE STAMP AND RETURN. THANK YOU.

Subn. [initials]

Utility Patent Application Transmittal Letter (Large Entity)
in triplicate

Form PTO-2038 in the amount of \$ 1,772.00 (in triplicate)

(4 pages)

(1 page)

(48 pages)

Patent application

(11 sheets)

Drawings

(38 pages)

IDS Transmittal w/ PTO-1449 & 1 cited references

(1 page)

Certificate of Mailing by Express Mail Label EL 825 833 545 US

Postcard

In re

Application of: Mark Lucovsky, et al.

For: IDENTITY-CENTRIC DATA ACCESS

JC675 U.S. PTO

10/003750

Date Mailed: October 22, 2001

Docket No.: 13768.198.1

Express Mail Label No.: EL 825 833 545 US



11/22/01

I show 10/22 file date

EXPRESS MAIL <small>UNITED STATES POSTAL SERVICE®</small>		POS. OFFICE TO ADDRESSEE																					
ORIGIN (POSTAL USE ONLY) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">PO ZIP Code 84111</td> <td style="width: 25%;">Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Weekend</td> <td style="width: 25%;">Flat Rate Envelope <input type="checkbox"/></td> <td style="width: 25%;"></td> </tr> <tr> <td>Date In 10/22/01</td> <td>Time In Noon</td> <td>Postage \$</td> <td></td> </tr> <tr> <td>Weight lbs. ozs.</td> <td>Military <input type="checkbox"/> 12 Noon <input checked="" type="checkbox"/> PM <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day</td> <td>Return Receipt Fee <input type="checkbox"/></td> <td></td> </tr> <tr> <td>No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday</td> <td>Int'l Alpha Country Code USA</td> <td>COD Fee <input type="checkbox"/></td> <td>Insurance Fee <input type="checkbox"/></td> </tr> <tr> <td colspan="2">Acceptance Clerk Initials [Signature]</td> <td colspan="2">Total Postage & Fees \$ 16.25</td> </tr> </table>				PO ZIP Code 84111	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Weekend	Flat Rate Envelope <input type="checkbox"/>		Date In 10/22/01	Time In Noon	Postage \$		Weight lbs. ozs.	Military <input type="checkbox"/> 12 Noon <input checked="" type="checkbox"/> PM <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee <input type="checkbox"/>		No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Int'l Alpha Country Code USA	COD Fee <input type="checkbox"/>	Insurance Fee <input type="checkbox"/>	Acceptance Clerk Initials [Signature]		Total Postage & Fees \$ 16.25	
PO ZIP Code 84111	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Weekend	Flat Rate Envelope <input type="checkbox"/>																					
Date In 10/22/01	Time In Noon	Postage \$																					
Weight lbs. ozs.	Military <input type="checkbox"/> 12 Noon <input checked="" type="checkbox"/> PM <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee <input type="checkbox"/>																					
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Int'l Alpha Country Code USA	COD Fee <input type="checkbox"/>	Insurance Fee <input type="checkbox"/>																				
Acceptance Clerk Initials [Signature]		Total Postage & Fees \$ 16.25																					
CUSTOMER USE ONLY <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">METHOD OF PAYMENT: Express Mail Corporate Acct. No.</td> <td>Federal Agency Acct. No. or Postal Service Acct. No.</td> </tr> <tr> <td colspan="2">FROM: (PLEASE PRINT) WORKMAN NYDEGGER & SEELEY 601 E SOUTH TEMPLE STE 1000 EAGLE GATE TOWER SALT LAKE CITY UT 84111-1011 USA</td> <td>TO: (PLEASE PRINT) ASSISTANT COMMISSIONER OF PATENTS WASHINGTON</td> </tr> <tr> <td colspan="2"></td> <td>PHONE (801) 553-2600</td> </tr> </table>				METHOD OF PAYMENT: Express Mail Corporate Acct. No.		Federal Agency Acct. No. or Postal Service Acct. No.	FROM: (PLEASE PRINT) WORKMAN NYDEGGER & SEELEY 601 E SOUTH TEMPLE STE 1000 EAGLE GATE TOWER SALT LAKE CITY UT 84111-1011 USA		TO: (PLEASE PRINT) ASSISTANT COMMISSIONER OF PATENTS WASHINGTON			PHONE (801) 553-2600											
METHOD OF PAYMENT: Express Mail Corporate Acct. No.		Federal Agency Acct. No. or Postal Service Acct. No.																					
FROM: (PLEASE PRINT) WORKMAN NYDEGGER & SEELEY 601 E SOUTH TEMPLE STE 1000 EAGLE GATE TOWER SALT LAKE CITY UT 84111-1011 USA		TO: (PLEASE PRINT) ASSISTANT COMMISSIONER OF PATENTS WASHINGTON																					
		PHONE (801) 553-2600																					
SEE REVERSE SIDE FOR SERVICE GUARANTEE AND LIMITS ON INSURANCE COVERAGE <div style="text-align: center; margin-top: 10px;"> <input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only): Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery. </div> <div style="text-align: center; margin-top: 5px;"> <input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday Customer Signature </div>																							
J-02 T12																							
FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com																							

Customer Copy
Label 11-F August 2000

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**Docket No.
13768.198.1

Applicant(s): Mark Lucovsky et al.

Serial No. 10/003,750	Filing Date October 22, 2001	Confirmation No. 4906	Examiner unknown	Group Art Unit 2176
Invention: IDENTITY-CENTRIC DATA ACCESS				

I hereby certify that the Request for Corrected Filing Receipt including Exhibits "A" and "B" (7 pgs) and postcard are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: The Assistant Commissioner for Patents, Washington, DC 20231 on FEB. 4, 2002.

JOLIN JOHNSON

(Typed or Printed Name of Person Mailing Correspondence)

(Signature of Person Mailing Correspondence)

EL 813 863 987 US

("Express Mail" Mailing Label Number)